



Audition Number: _____
 Age: _____
 Grade: _____
 Height: ft: __ in: __
 Weight: _____

2019-2020 Performance Company Audition Registration Form
****registration fee \$25**

Dancer Information:

First Name: _____ Last Name: _____ DOB: _____
 Address: _____ City: _____ Zip: _____
 School District: _____ Phone (c): _____ Email: _____

Parent/Guardian Information:

Name: _____ Phone (c): _____ Email: _____
 Name: _____ Phone (c): _____ Email: _____

Check the box(es) of the level(s) for which you wish to be considered:

- Nutcracker Guest Artist (ages 7+) Junior Company Artist (ages 8-12) Senior Company Artist (ages 13-18)
 Professional Trainee Program (ages 14+) Professional Company Artist (18+)

Check the box(es) of the performance opportunities for which you are available and willing to be cast:

- The Nutcracker* @ Chelsea HS (Dec. 7-8 2019) *Gershwin!* @ Chelsea HS (March 22, 2020)
 The Nutcracker @ Jackson College (Dec. 14-15 2019) *Gershwin!* @ Jackson College (March 28, 2020)

Dance class enrollment requirements – please list enrolled classes below:

- guest dancers must attend 1 ballet class weekly (more may be required for some roles)
- junior company dancers must attend 3 ballet or pointe (or pre-pointe) classes weekly
- senior company dancers must attend 5 ballet / pointe classes weekly
- professional trainee program (PTP) dancers must attend 7-8 ballet / pointe / variation / partnering classes weekly, plus conditioning as directed by the artistic director
- professional and male dancers must attend classes as directed by the artistic director

Class Description	Cass Day & Time	Dance School
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

****Professional Trainee Program applicants, please answer the following questions in a personal statement and bring it to your scheduled audition time.**

1. Please describe your training from the past 2 years, including summer intensives and year-round curriculums.
2. Briefly discuss your long term and short-term goals.
3. Please identify what you hope to gain from the professional trainee program.

For Office Use Only			
Date Received:	Payment Date:	Check #:	Cash Receipt #: